

Healthy Child Care



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Playing It Safe with West Nile Virus

With summer in full swing, so are the concerns about West Nile virus. It is important to remember that very few persons are actually at-risk for contracting West Nile virus in Missouri at this time. Transmission of this virus occurs when people become infected by the bite of a mosquito infected with West Nile virus. Even in areas where the virus is circulating, very few mosquitoes are infected with the virus; and the chances you will become severely ill from any one mosquito bite are extremely small. Less than 1% of persons infected with West Nile virus will develop severe illness. Among those with severe illness due to West Nile virus, case-fatality rates range from 3% to 15% and are highest among the elderly. People who are over age 50 have a higher risk for becoming seriously ill when they get infected with West Nile virus.

Mosquitoes become infected when they feed on infected birds, which may circulate the virus in their blood for a few days. Infected mosquitoes can then transmit West Nile

virus to humans and animals while biting to take blood. The virus is located in the mosquito's salivary glands. During blood feeding, the virus may be injected into the animal or human where it can multiply, possibly causing illness.



Dead birds can help local health departments track West Nile virus. Check with your local health department about their policy on reporting dead birds. Persons should avoid bare-hand contact when handling any dead animals and use gloves or double plastic bags to place the carcass in a garbage can.

Mosquito Control

Reducing the mosquito population around your property is one of the most effective ways to reduce mosquito bites and can be accomplished by eliminating standing water:

✓ Dispose of tin cans, plastic containers, ceramic pots or similar water-holding containers.

✓ Remove all discarded tires on your property. Used tires are very significant mosquito breeding sites.

✓ Drill holes in the bottoms of recycling containers that are kept outdoors.

✓ Make sure roof gutters drain properly, and clean clogged gutters in the spring and fall.

(continued on page 4)

Inside This Issue

BCC Update	2
Consumer Product Safety Commission	3
Playing It Safe with West Nile Virus (continued)	4
Learning About Kids' Fiber Needs & CACFP Training Schedule	5
Is a Vegetarian Diet OK For Kids?	6-7
Concerns About CCA Treated Lumber	8-9
Hand Sanitizers	10
Sun Safety Works	11
Upcoming Dates & Events	12



Ask the Bureau

This column is to address some of the frequently asked questions from child care providers, directors, and staff. If you would like to ask a question of the Bureau of Child Care to be considered for this column, please email Jo Anne Ralston at ralstj@dhss.state.mo.us.

Why is it Important to Clean the Air Ducts in My Child Care Facility?

Over the last 20 years, new technology has been developed to make buildings more energy efficient. The down side to making buildings more energy efficient is that indoor air can become four or five times more polluted than the outside air. Polluted indoor air can be a trigger for allergic reactions and asthma attacks in children and adults.

The air ducts of your heating and cooling system can become filled with dust, dirt, pollen, animal dander, animal fur and other airborne contaminants. These contaminants build up inside the air ducts and over time can become a breeding ground for fungus, mold spores, mildew and other microbes. Each time the furnace or air conditioner is turned on, these contaminants are expelled and circulated throughout the facility.

When air ducts are clean, the facility smells better, and the heating and cooling system operates more efficiently. Levels of dust, pollen, mold, and other contaminants that trigger allergies and asthma attacks are removed.

There are companies that specialize in cleaning air ducts. Contact your heating and cooling contractor for companies that can clean the air ducts in your facility. After air ducts are cleaned, it is recommended that air filters be changed monthly.



This publication provides topical information regarding young children who are cared for in child care settings. We encourage child care providers to make this publication available to parents of children in care or to provide them with the web address so they can print their own copy.

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Consumer Product Safety Commission

The U. S. Consumer Product Safety Commission (CPSC) is an independent federal regulatory agency that works to reduce the risk of injuries and deaths from consumer products. You can reach the CPSC through:



products have been recalled, and, if so, what you should do with them. If you have products that you wish to donate or sell and you have lost the original packaging, contact the CPSC for product information.

- ◆ The CPSC toll-free Hotline at (800) 638-2772 or (800) 638-8270 for the hearing and speech impaired.

- ◆ The CPSC web site address at <http://www.cpsc.gov>

How to Obtain Recall Information

The U.S. CPSC issues approximately 300 product recalls each year, including

many products found in child care settings.

Many consumers do not know about the recalls and continue to use potentially unsafe products. As a result, used products may be loaned or given to a charity, relatives, or neighbors, or sold at garage sales or secondhand stores. You can help by not accepting, buying, lending, or selling recalled consumer products. You can contact the CPSC to find out whether

To receive CPSC's current recall information automatically by e-mail or fax or in a quarterly compilation of recalls sent by regular mail, call CPSC's Hotline and after the greeting, enter 140, then follow the instructions given.

Each issue of this newsletter will highlight a recalled product or a safety issue; however, it would be wise to check with the CPSC on a regular basis for more comprehensive information.

CPSC, Fisher-Price Announce Recall of Little People® Animal Sounds Farms

In cooperation with the U.S. Consumer Product Safety Commission, (CPSC), Fisher-Price, of East Aurora, N.Y., is voluntarily recalling about 67,000 Little People® Animal Sounds Farms manufactured from June 17, 2002 through July 31, 2002. Two small metal screws that hold the toy "stall doors" in place can come off, posing an aspiration or choking hazard to young children.

Fisher-Price has received 33 reports of the screws coming off of the toy, including four reports where a screw was found in the child's mouth and one report of a child that aspirated a screw into his lung. The latter case required the child to be hospitalized and undergo emergency surgery to remove the screw from his lung.

The recalled Little People® Animal Sounds Farms are shaped like a barn and make animal sounds when the doors of the cow or horse stall are opened. The recalled toys have a model number of 77973 or 77746 and a six-character manufacturing date code that begins with 168 through 212, followed by the number 2 as the fourth digit. Both the model number and date code can be found on the underside of the green ramp. The Fisher-Price logo appears at the top of the tallest side of the barn in red and white. The recalled toys were manufactured in Mexico.

Mass merchants and toy stores nationwide sold these toys between July 2002 and December 2002 for about \$30.

Consumers should take the toy away from young children immediately and contact Fisher-Price toll-free at (866) 259-7873 anytime to receive a free repair kit. Consumers also can log on to www.service.mattel.com to determine if their product is among the recalled models and to order the free repair kit online.

(continued from page 1)

- ✓ Turn over plastic wading pools and wheelbarrows when not in use. (If plastic wading pool is in approved child care space, it must conform to all applicable licensing rules)
- ✓ Change the water in bird-baths and pet dishes at least weekly.
- ✓ Clean vegetation and debris from edges of ponds.
- ✓ Clean and chlorinate swimming pools, outdoor saunas, and hot tubs.
- ✓ Drain water from pool covers.
- ✓ Use landscaping to eliminate standing water that collects on your property.

Personal Protection During Outside Activity

It is not necessary to limit any outdoor activities. However, you can and should try to reduce your risk of being bitten by mosquitoes. Because mosquitoes are most active at dawn and dusk, you may decide to limit outdoor activities at these hours. You should also make sure all windows and doors have screens that are in good repair.

Insect repellents often contain very strong chemicals (e.g. DEET-look for its chemical

name N,N-diethyl-m-toluamide) and should be handled and applied carefully, especially in the case of young children. Because young children's bodies are more sensitive to chemical exposures, and because some chemicals can affect fetuses, it is important to handle insect repellents carefully and avoid over-exposure by carefully following label instructions and the following guidelines:

- ✓ Keep repellents (and all chemicals) out of children's reach.
- ✓ Avoid using repellents on children less than two years old.
- ✓ Do not allow children to apply repellents themselves.
- ✓ Use only small amounts of repellent on children, and use repellents with 10% or less DEET by concentration.
- ✓ Do not apply repellents directly to children's skin; apply to your hands then on the child.
- ✓ Do not apply repellents near a child's eyes, nose, mouth, or hands to prevent accidental eye contact or ingestion.
- ✓ Avoid using DEET products on skin damaged by

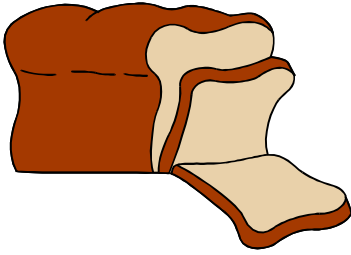
sunburn, cuts, rashes, or other skin conditions.

- ✓ Avoid breathing DEET products (especially sprays) by applying in well-ventilated rooms and not directly to the face. Apply to your hands and then rub carefully on the face.
- ✓ Avoid prolonged use of DEET products, and do not apply to skin that will be covered by clothing.
- ✓ Wash treated skin with soap and water upon returning indoors.

Because of concerns about children's reactions to insect repellent, parents should provide any insect repellent they wish to have applied to their child while in child care. In addition, child care providers should have written parental permission on file before applying any insect repellent on children.



Learning About Kids' Fiber Needs



We've heard about fiber and how it can be beneficial to our health. But, what is it and why do kids need it? Fiber is found in plant foods and is generally considered the "bulk or roughage" in your diet. It is found in two forms, soluble and insoluble.

Soluble fiber is found in oats, peas, beans, and certain fruits and vegetables such as apples, oranges, and carrots. Soluble fiber may help lower blood cholesterol levels and helps regulate the body's use of sugars.

Insoluble fiber occurs in wheat, potatoes, and certain fruits and vegetables. It promotes regularity and helps prevent constipation. The edible skins on fruits and vegetables are a great source of fiber.

Kids, as young as three, need fiber. It helps children begin the lifelong process of maximizing health and preventing disease. Fiber is important to a child's health. A diet high in fiber with moderate amounts of fat may help reduce the risk of developing heart disease and some cancers.

The amount of fiber kids need is different from adults. To determine how much fiber a child needs, add five to his or her age. Therefore, a three-year-old needs 8 grams of fiber and a five-year-old needs 10 grams of fiber daily. This rule applies to healthy children from age three to 18.

So, how can you get children to fiber-up? Here are 10 great ways.

1. Provide a variety of foods.
2. Choose high-fiber snacks like English muffins, whole-grain cereal, fresh fruit, and raw vegetables.
3. Serve Them Breakfast! This is a great time for your child to eat whole-grain cereal, oatmeal, and whole-wheat muffins and waffles.
4. Make the switch to whole grains. Look for nutrition labels that read "whole-wheat" or "whole-grains". Breads made with whole grains add interest and taste to your meals. Try cracked wheat, oatmeal bread, pumpernickel, rye, and whole-wheat breads.
5. Serve legumes two to three times a week.
6. Serve at least five servings of fruits and vegetables daily.
7. Serve fruits and vegetables with edible skin.
8. Choose whole fruit more often than juice.
9. Use higher fiber foods when you cook for your child. For instance, substitute some whole-wheat flour in recipes in place of regular all-purpose flour when possible.
10. Read food labels. Look for words like "high in fiber" or check for "whole-wheat" in the ingredient list.

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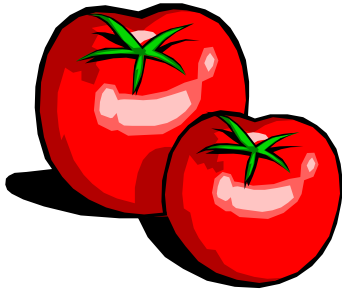
CACFP Training Schedule

Orientation training for the Child and Adult Care Food Program for child care centers is held in the five district offices located throughout the state on the following dates:*

*July 10, 2003
August 7, 2003
September 2, 2003
October 2, 2003*

**Shelter and after-school training held separately.*

A Vegetarian Diet...is it OK for Kids?



Children require essential nutrients and vitamins to grow properly and develop to their full potential. According to Brenda Davis, registered dietitian and author of “Becoming Vegan”, a vegetarian diet, if well-planned, can supply all the nutrients that children need for their energy needs and growth.

Types of Vegetarian Diets Include:

- √ Semi-vegetarian: This includes people who mostly follow a vegetarian diet but sometimes eat meat, poultry and fish.
- √ Lacto-ovo-vegetarian: This includes people who avoid meat, poultry and fish but choose to eat eggs and dairy products. Most vegetarians in the United States fit into this category.
- √ Lacto-vegetarian: This group of vegetarians includes people who avoid meat, poultry, fish and eggs, but eat dairy products.
- √ Strict vegetarian or vegan: This includes people who avoid animal products:

no meat, poultry, fish, eggs, milk, cheese, and other dairy products. Animal products as ingredients are also avoided (ex: baked goods made with eggs, honey which is made from bees, refried beans made with lard).

Why Do People Choose a Vegetarian Diet?

- √ Health reasons;
- √ Concerned about the environment, compassion for animals;
- √ Religious, spiritual or ethical reasons;
- √ Preference of flavors and food mixtures of vegetarian dishes; and
- √ Plant-based diet costs less.

Health Benefits Include:

- √ Lower incidence of heart disease, high blood pressure, adult-onset diabetes, obesity, and some forms of cancer.

Check the list of *nutrients that may come up short in a vegan diet. These are of special concern. Consult a registered dietitian or your doctor if you don't think you or your children are getting adequate sources of these nutrients. A supplement might be necessary.

***Vitamin B12:** *Deficiency can cause anemia and severe, irreversible nerve damage.*

√ Eat foods fortified with B12: breakfast cereals, soy milk products, vegetarian burger patties.

***Vitamin D:** *Helps body absorb calcium and phosphorus for strong bones and teeth.*

√ Exposure to sunlight – 20 to 30 minutes per day on hands and face, two or three times per week.

√ Children with darker skin or who have limited exposure to sunlight may require vitamin supplements.

√ Eat foods fortified with Vitamin D: breakfast cereals, soy beverages.

***Calcium:** *Bone builder, builds healthy teeth, helps muscles contract, transfers nerve impulses, helps blood clot, helps heart to beat.*

√ Eat foods fortified with calcium: soy and rice milks, orange juice, breakfast cereals, tofu, dark green leafy vegetables, nuts, and legumes.

***Protein:** *Build, repair and maintain body tissues. Deficiency in childhood can cause retarded growth.*

√ Eat legumes (beans and peas), nuts, seeds, and tofu.

***Iron:** *Deficiency leads to anemia and weaker immune system.*

✓ Eat whole or enriched grains, iron-fortified cereals, legumes, tofu, dark-green leafy vegetables (ex: spinach and beet greens), seeds, prune juice, dried fruits and black strap molasses.

✓ Include Vitamin C rich foods in every meal (ex: citrus fruits or juices, broccoli, tomatoes, and green pepper) to help absorption of iron from the plant sources.

✓ Use iron pots and skillets. Some iron from the pot may pass into food.

***Zinc:** *Essential for growth, promotes cell reproduction and tissue growth and repair. Deficiency can lead to weaker immune system and appetite loss. Deficiency in childhood can cause retarded growth.*

✓ Eat legumes, whole grain products, wheat germ, bran, seeds, nuts and tofu.

***Calories and fat:** *Deficiencies can lead to retarded growth in children. Some diets fail to meet calorie needs to adequately nourish children. This is many times due to the high fiber content, which can easily fill up children's*

stomachs making it difficult to consume enough calories for proper growth. Children can be given avocados, peanut butter, nuts, seeds, dried fruits and soy products to meet this need.

✓ Encourage frequent snacks that provide nutrients, as well as food energy (calories).

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Emergency Kit for Providers

SAFE, the new nonprofit organization headed by Ann Brown, the former chairman of the U.S. Consumer Product Safety Commission, and Knowledge Learning Corporation (KLC) have prepared an emergency kit for child care providers that is available free of charge to anyone who is interested.

The emergency kit includes an enhanced emergency card for providers and two documents for parents: "How Parents Can Help Their Children," with activities and resources for disaster preparedness, and "Questions to Ask Your Child Care Provider" on disaster preparedness. The free kit is available by calling Knowledge Learning Corporation toll-free at 1-877-childhood (1-877-244-5346) or by downloading the document from www.knowledgelearning.com.

SAFE and KLC are participating in this initiative to commemorate the heroic teachers at KLC's Children's Discovery Center located in the World Trade Center. They saved the lives of 42 children in their care on September 11, 2001. The combination of a well-rehearsed disaster plan and thorough, portable emergency records kept for each child that the teachers grabbed during evacuation saved the lives of those children. The information in those emergency records enabled the teachers to reunite the children with their parents by 3 p.m. that tragic day.

What is Chromated Copper Arsenate?

Chromated copper arsenate or CCA, is a chemical preservative that protects wood from rotting due to insects and microbial agents. CCA contains arsenic, chromium and copper. CCA has been used to pressure treat lumber used for decks, playgrounds (playsets) and other outdoor uses since the 1930's. Since the 1970's, the majority of the wood used in residential settings was CCA-treated wood.

Should I be concerned about CCA-treated wood in playground equipment?

Consumer Product Safety Commission (CPSC) staff is concerned about CCA-treated wood in playground equipment because exposures to arsenic in the wood might increase a person's risk of developing lung or bladder cancer over his or her lifetime. Children can be exposed to the arsenic in CCA-treated wood by playing on playgrounds made from this wood.

CPSC staff believes that hand-to-mouth behavior is the primary source of exposure to arsenic from CCA-treated wood playsets. Young children who routinely put their

hands in their mouths (generally children under 6 years of age) can then ingest the arsenic directly from their hands or indirectly when they touch food or toys, which are then placed in their mouths.



What is the Exposure to arsenic from CCA-treated playsets?

A child's exposure to arsenic from CCA-treated playsets and the consequent risk of developing cancer depends upon a number of factors. These factors include:

- √ the number of days the child plays on the CCA-treated playset each year;
- √ the number of years they play on the CCA-treated playset;

√ the amount of arsenic that is picked up on his or her hands during play; and

√ the amount of arsenic they ingest from his or her hands throughout the day.

What is the risk from arsenic exposure in CCA-treated playgrounds?

CPSC staff calculated the increased lifetime risk of developing lung or bladder cancer from exposure to arsenic for the individual who plays on CCA-treated wood playsets during early childhood. This increased cancer risk ranges from about 2 in a million to 100 in a million. The staff used a range of values to estimate the increased number of lung or bladder cancer cases that could result from a specific level of exposure because there is some uncertainty about the amount of arsenic dose (exposure) that is necessary to cause cancer.

Cancer does not appear immediately upon exposure to a particular cancer causing agent. There is a lag time between the time of exposure and the ultimate development of cancer. This lag time

Should I Be Concerned About It?

could be decades. It is difficult to determine exactly what causes a particular cancer in an individual because individuals are often exposed to many cancer-causing agents either at the same time or over their lifetime. Not every exposed individual will get cancer at some time during his/her life.

Reducing exposure to arsenic from CCA-treated playground equipment

If you are uncertain if a playset was made from CCA-treated wood, a call to the playset manufacturer might help determine if the playset contains CCA-treated wood. Since the 1970's the majority of the pressure-treated wood used in residential settings was treated with CCA. Therefore, if you are not sure if the playset is composed of CCA-treated wood, you should assume it is.

Parents and caregivers should be aware that children are exposed to arsenic through their hand-to-mouth activity while playing on and after playing on CCA-treated wood playsets. To minimize the risk of exposure to arsenic from CCA-

treated playsets, parents and caregivers should thoroughly wash the child's hands with soap and water immediately after outdoor play, especially before eating. Children should also be discouraged from eating while on CCA-treated playgrounds.

Based on limited data, some groups suggest that applying certain penetrating coatings such as oil-based, semi-transparent stains on a regular basis (once a year or every other year depending upon wear and weathering) may reduce the amount of arsenic that comes out of the wood.

If you decide to remove your CCA-treated wood playset, the Environmental Protection Agency (EPA) states that CCA-treated wood should never be burned in open fires, stoves, fireplaces, or residential boilers. Contact the EPA at www.epa.gov or your state or local solid waste management offices to receive instructions on how to dispose of CCA-treated wood.

Are there alternatives to CCA?

There are a number of non-arsenic containing preservatives that have been registered by EPA to pressure-treat wood for consumer applications. ACQ (ammonium copper quaternary) and copper boron azole (CBA) are common ones. Some wood treated with these preservatives is already available at retail outlets such as home improvement stores. In addition, playground equipment made of other non-arsenic containing components is also available (e.g., woods such as cedar and redwood and non-wood alternatives such as metals and plastics).



Information for this article was taken from the CPSC website at www.cpsc.gov

New Guidelines for Using Hand Sanitizers

In October 2002, the Centers for Disease Control and Prevention issued new recommendations for hand hygiene in health care settings that included using alcohol-based hand rubs. These recommendations for increased use of alcohol-based hand rubs in *health care settings* **do not** apply to child care. According to the CDC, "hand washing with soap and water remains a sensible strategy for hand hygiene in non-health care settings and is recommended by CDC and other experts." The guideline for health care settings emphasizes that the hand rubs (also called hand sanitizers) can only be used on visibly clean hands.

Hand sanitizer products have drawbacks. They are more expensive than soap and water. They must be stored as flammable chemicals and as toxic products. A small amount of a hand sanitizer is poisonous if ingested. Many users fail to apply enough hand sanitizer to keep their hands wet with the chemical for the minimum required contact time of 15 seconds. The wall dispensers get clogged up and fail to deliver the amount of product required. The disposable bottles are easily put where children can access them.

In child care, hand soiling often involves visible contamination. So, in child care, even though hand sanitizer products may be more portable than sinks, washing with soap and water is best. Caregivers and children need hand hygiene many times a day when their hands are visible soiled by lunches partially eaten, handling reusable play materials like sand or doughy materials, playing in shared water or playground dirt, using finger paints, removing and replacing shoes. See the box for a list of when hands must be cleaned adapted from *Caring for Our Children*, the national health and safety standards. Remember, hand sanitizers are not cleaning agents. They sanitize visibly clean hands.

The difference in time required to use a hand sanitizer properly versus hand washing is not significant. Compare 15 seconds of rubbing after applying a hand sanitizer versus a hand washing routine using a 10 second lather with water wetting and rinsing before and after the lather.

- Centers for Disease Control and Prevention. *Hand Hygiene Fact Sheet*. <http://www.cdc.gov/od/oc/media/pressrel/fs021025.htm>.

- *Caring for Our Children*, the National Health and safety Performance Standards: Guidelines for Out-of-Home Child Care. Available for purchase from the American Academy of Pediatrics (800/433-9016) and on the web at www.nrc.uchsc.edu. The primary standard on handwashing is 3.020.

Adapted with permission from "2002 Update on Hand Hygiene in Child (Day) Care Settings" Exchange, March 2003. For full text of the article go to the free resources area of the EXCHANGE website www.childcareexchange.com

When to Wash:

- ✓ Upon arrival for the day
- ✓ When moving from one group to another

◆ Before and after:

- ✓ Eating, handling food or feeding a child
- ✓ Giving medication
- ✓ Playing in water that is used by more than one person

◆ After:

- ✓ Diapering
- ✓ Using the toilet or helping a child use the toilet
- ✓ Handling body fluid from sneezes, noses, mouths or sores
- ✓ Handling uncooked food, especially meat and poultry
- ✓ Handling pets and other animals
- ✓ Playing in sandboxes or on the playground
- ✓ Cleaning or handling the garbage

Fingernails: No artificial nails. Keep nail tips short.

Rings: Wear only simple finger bands so you can easily clean and sanitize under and around them.



Sun Safety Works - If You Do It!

Adults know about, but do not practice safe sun exposure for children or for themselves. A June 2002 report in Pediatrics found that by their teens, many kids had frequent sunburns. Many were getting burned to get tanned and failing to use well-publicized protective measures. Unprotected sun exposure during childhood tends to be a lifelong habit and contributes directly to lifetime skin cancer as well as premature and more severe signs of aging of the skin. These signs of aging include more and earlier wrinkles, and changes in the thickness of the skin. Limiting sun exposure during childhood and adolescence can decrease lifetime risk of some types of skin cancer by 78%.

The sun's ultraviolet light does the damage - both UVA and UVB. UVB penetrates the skin more and does more harm to the skin than UVA.

Unprotected exposure of the eyes to sunshine is very harmful also. The front parts of the eyes absorb nearly all the ultraviolet light, contributing to development of cataracts and other less common eye disorders.

Sun protection is for everyone. Early and ongoing education about sun safety seems to work. Rising rates of skin cancer deaths in sunny Australia leveled off after routine early and ongoing education began.

Be sure your program has and uses a written policy that covers how the program protects children and staff from sun damage. Teaching children how to protect themselves from sun injury should be a part of every early childhood curriculum.

Article from Summer 2003 issue of HEALTH LINK, Pennsylvania Chapter of American Academy of Pediatrics

Recipe for "GOOP"

3 cups corn starch
2 cups warm water

Gradually add water to corn starch. Mix ingredients together with hands. Goop is done when mass goes from lumpy to satiny texture.

Goop hardens in the air and turns to liquid when held. A light touch causes a finger to sink in.

This recipe is from The Creative Curriculum for Infants & Toddlers.

A Few Things To Do This Summer

- ✓ *Read a book under a tree.*
- ✓ *Take a walk early in the day.*
- ✓ *Bring the paint and easel outside for a different lighting perspective.*
- ✓ *Have a picnic snack outside.*
- ✓ *"Paint" the outside of the building using old brushes and water.*
- ✓ *Have the children do their own theatrical production of their favorite story.*
- ✓ *Write a story with the children about the morning walk.*
- ✓ *Set up a lemonade stand.*
- ✓ *Encourage children to try new vegetables by growing them in a garden.*
- ✓ *Make some "goop" and play with it outside.*

Upcoming Dates & Events

August 1-31, National Immunization Awareness Month.

Each year, this commemorative month increases awareness about immunization across the lifespan as parents and children prepare for the return to school, and the medical community begins preparations for the upcoming flu season.

August 1-31, Children's Vision and Learning Month.

This month-long campaign encourages parents to have their children's vision examined by an eye-care professional before the start of each school year. For more information, contact the American Foundation for Vision Awareness at 800-927-AFVA.

August 1-7, World Breastfeeding Week.

Breastfeeding advocates, health care professionals and social service agencies focus attention on the importance and benefits of breastfeeding. More information is available online at www.lalecheleague.org or by calling 847-519-7730.

September 1-30, Baby Safety Month.

During Baby Safety Month, the Juvenile Products Manufacturers Association provides information on the safe selection and use of baby products, such as cribs, car seats, strollers and bedding. More information and promotional materials are available online at www.jpma.org or by calling the JPMA at 856-638-0420.

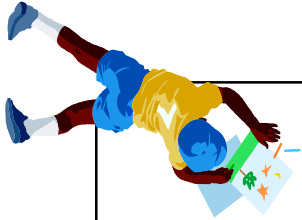
September 1-7, National Childhood Injury Prevention Week.

The purpose of this week is to reduce the number of deaths and disabilities that result from childhood injuries through awareness and education about the problem. More information is available online at www.assafeaspossible.org or by calling 215-364-1555.

September 21-27, National 5-A-Day Week.

Improving your eating habits reduces the risk of diet-related cancers and other chronic diseases. During National 5-A-Day Week, Americans are encouraged to eat five or more servings of fruits and vegetables per day and adopt this habit for life. More information is available online at www.5aday.com/html/events/week.php or by calling 302-235-2329.

Alternate forms of this publication for persons with disabilities may be obtained by contacting the Missouri Department of Health and Senior Services, Bureau of Child Care, P.O. Box 570, Jefferson City, MO., 65102, 573-751-2450. EEO/AAP services provided on a nondiscriminatory basis.



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